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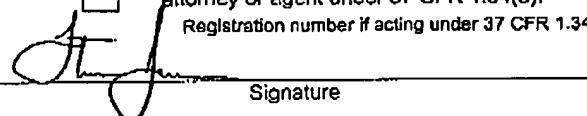
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PTO/SB/22 (10-04)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) (fees effective on or after October 1, 2004)		Docket Number (Optional) 60712 (49321)
Application Number	10/767,635	Filed January 28, 2004
For IMIAGE FORMING APPARATUS		
Art Unit 2854	Examiner	D. Ghali
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
	Fee	Small Entity Fee
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120.00	\$60.00
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450.00	\$225.00
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1,020.00	\$510.00
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1,590.00	\$795.00
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2,160.00	\$1,080.00
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>04-1105</u> I have enclosed a duplicate copy of this sheet.		
I am the <input type="checkbox"/> applicant/inventor.		
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).		
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>42,693</u>		
<input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____		
 Signature		Date <u>December 13, 2005</u>
Steven M. Jensen Typed or printed name		Telephone Number <u>(617) 439-4444</u>
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input type="checkbox"/> Total of <u>1</u> forms are submitted.		

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted by facsimile to the U.S. Patent & Trademark Office by facsimile number 571-273-8300 on December 13, 2005.

Dated: December 13, 2005

Signature: 

(Steven M. Jensen)

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